



Filing ID #10021903

FINANCIAL DISCLOSURE REPORT

Clerk of the House of Representatives • Legislative Resource Center • 135 Cannon Building • Washington, DC 20515

FILER INFORMATION

Name: Joseph Schneider
Status: Congressional Candidate
State/District: MA06

FILING INFORMATION

Filing Type: Candidate Report
Filing Year: 2018
Filing Date: 08/3/2018

SCHEDULE A: ASSETS AND "UNEARNED" INCOME

Asset	Owner	Value of Asset	Income Type(s)	Income Current Year to Filing	Income Preceding Year
CAPITAL ONE [BA]		\$1 - \$1,000	None		
FIDELITY [PE]		\$50,001 - \$100,000	None		
DESCRIPTION: EDS Pension					
JSA HOLDING, INC., 100% Interest [OL]		\$100,001 - \$250,000	None		
LOCATION: BOSTON, MA, US					
DESCRIPTION: Consulting Services					
JSA PARTNERS, INC., 82% Interest [OL]		\$50,001 - \$100,000	None		
LOCATION: BOSTON, MA, US					
DESCRIPTION: Consulting Services					
USAA [BA]		\$1,001 - \$15,000	Interest	\$1 - \$200	\$1 - \$200

* For the complete list of asset type abbreviations, please visit <https://fd.house.gov/reference/asset-type-codes.aspx>.

SCHEDULE C: EARNED INCOME

Source	Type	Amount Current Year to Filing	Amount Preceding Year
JSA PARTNERS, INC	EMPLOYMENT	\$24,000.00	\$32,000.00
JSA HOLDING, INC.	MANAGEMENT FEES	\$78,800.00	\$37,059.00

SCHEDULE D: LIABILITIES

Owner	Creditor	Date Incurred	Type	Amount of Liability
	DEPT OF EDUCATION	1999-2004	EDUCATION LOAN	\$15,001 - \$50,000
	BANK OF AMERICA	2000-2018	CREDIT CARD	\$15,001 - \$50,000

SCHEDULE E: POSITIONS

None disclosed.

SCHEDULE F: AGREEMENTS

None disclosed.

SCHEDULE J: COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

Source (Name and Address)	Brief Description of Duties
BLAIR-HSM (BOHEMIA, NY, US)	CONSULTING
DELTA INFORMATION SYSTEMS (HORSHAM, PA, US)	CONSULTING
LOCKHEED MARTIN (BETHESDA, MD, US)	CONSULTING
NOVASOL (HONOLULU, HI, US)	CONSULTING
OROLIA (ROCHESTER, NY, US)	CONSULTING

EXCLUSIONS OF SPOUSE, DEPENDENT, OR TRUST INFORMATION

Trusts: Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?
☐ Yes ☒ No

Exemption: Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?
☐ Yes ☒ No

CERTIFICATION AND SIGNATURE

☒ I CERTIFY that the statements I have made on the attached Financial Disclosure Report are true, complete, and correct to the best of my knowledge and belief.

Digitally Signed: Joseph Schneider , 08/3/2018